## HANDGUN LICENSING



• MUST USE MOST **CURRENT** FORM

• PRINT CLEARLY IN BLACK INK

• MAKE SURE ENTIRE CIRCLE IS FILLED

**EXAMPLE:** 

● Yes O No

## ONLINE COURSE PROVIDER APPLICATION

APPLICANT INFORMATION					FOR DPS USE ONLY		
O Original Applicant	O Driver License	LTC Instructor No	)				
O Renewal	O ID Card						
DL/ID State (2-LETTER CODE)	DL / ID Number						
Last Name		First Name		MI		Suffix (IF ANY)	
CONTACT INFORMATION							
Residence Address (Canno	ot be a PO Box)	City		State (2-LETTER CODE)			ZIP Code
Mailing Address (if differen	t from Residence Address)	City		State (2-LETTER CODE)			ZIP Code
Phone Type O F	lome O Cell O	Office	Number				
Phone Type O F	lome O Cell O	Office	Number				
Applicant Email							
PAYMENT INFORMATION: Approved Online Course Provider Application Fee: \$100							
<b>Note:</b> Payment must be in the form of a personal check, cashier's check, or money order to Texas Department of Public Safety.  I understand all fees submitted to Handgun Licensing are <b>non-refundable</b> and <b>non-transferable</b> .							
on this document or any oth	ded is true and correct, and I er supplement provided to D	PS may result in <b>crim</b>				any false	statement made
Mail to: Regulatory Service	es Division MSC 0245						

Mail to: Regulatory Services Division MSC 0245
Texas Department of Public Safety
P.O. Box 15888

Austin, Texas 78761-5888

**Privacy Policy:** (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect.